

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-876)							SERIAL NO. <u>08/ 951,188</u>	FILING DATE					
							APPLICANT(S)						
CLAIMS													
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT					C		D	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
201				5			51						
202				5			52						
203				0			53						
204				0			54						
205				0			55						
206				0			56						
207				0			57						
208				2			58						
209				0			59						
210				0			60						
211				2			61						
212				2			62						
213				2			63						
214				2			64						
215				2			65						
216				2			66						
217				2			67						
218							68						
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40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.							TOTAL IND.						
TOTAL DEP.				31			TOTAL DEP.						
							TOTAL CLAIMS						

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-876)							SERIAL NO. <i>68/195/188</i>	FILING DATE					
							APPLICANT(S)						
CLAIMS													
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			A		B		C	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
/ 01							/ 51						
/ 02							/ 52						
/ 03							/ 53						
/ 04							/ 54						
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/ 06							/ 56						
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/ 47							/ 97						
/ 48							/ 98						
/ 49							/ 99						
/ 50							/ 100						
TOTAL IND.							TOTAL IND.						
TOTAL DEP.							TOTAL DEP.						
							TOTAL CLAIMS						

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-876)**

SERIAL NO.

08/951188

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		A AFTER- 1st AMENDMENT		B AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/		/	
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31		/		/		/
32		/		/		/
33	/	0	X			
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TOTAL IND.	11		2		10	
TOTAL DEP.	56		30		64	
TOTAL	67		32		74	

	A		B	
	IND.	DEP.	IND.	DEP.
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52		/		/
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54		/		/
55		/		/
56		/		/
57		/		/
58		/		/
59	/	0		/
60		/		/
61		/		/
62		/		/
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TOTAL IND.				
TOTAL DEP.				
TOTAL CLAIMS				

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-876)

SERIAL NO.

08/951188
APPLICANT(S)

FILING DATE

CLAIMS

	AS FILED		AFTER- 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.						
TOTAL DEP.						

	AS FILED		AFTER- 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						